Form. AR-50-71

STATE OF GEORGIA

Application for RECORDS DISPOSITION STANDARD

OFFICE OF SECRETARY OF STATE
DEPARTMENT OF ARCHIVES & HISTOR
RECORDS HABACEMENT DIVISIOS

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PAGE

DEUMS IA			MECCADE MARACEMENT DIVISION					
		separate instruction		FOR RECORDS MANAGEME	ENT DIVISION	USE		
	30, 1972 front and reverse of this form. Sign original and two copies Date Received on No. and forward to Department of Archives and History, Attention: NEC 4.0.4			Date Received	Application	,	Completed	
	nd forward to Departi Icorde Management Of;		listory, Attention	DEC 1 9 1972	2445	DEC 2	2 1972	
3 AGERTY, Civision, Subdivision & Admi		Ireas		Person to Costant				
Georgia Department o	_		·			بعد :	1	
Consumer Protection - State Fuel Oil Laboratory			Dr. J.D.	Harvey	give	V		
5235 Kennedy Road			State Oil Chemist 6 361-6336					
Forest Park, Ga. 300	50			State Oil Che	mist	361-6	336	
7.ACTION REQUESTED								
X ESTABLISH DISP RECORD WILL CO	OSITION ST NTINUE TO	ANDARD; ACCUMULATE.		OSE OF PRESI JRTHER ACCUI				
8.Earliest & Latest 9 Dates of Series	·Exact Serie	s Title						
1967 to Date	Fuel Oil Mo	bile Calibrat	ing Unit Re	eport Files				
10. What is the function	of the offic		· · · · · · · · · · · · · · · · · · ·					
What is the function	or the offic	e in which th	is record se	eries is creat	ted?		-	
This Unit administers	the Eucl Oi	1 Act provid	ling for the	rogistoring	of Com	iao Ctat	ione	
Inspecting, Sampling		_	-					
Petroleum Products.	_	_			-			
issues certificates o			_				ns	
for quality of produc				_			· -	
products; registers B		_	_		_	_		
for quality.		. –				 -		

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		-						
11. This file contains the	e following o	documents (in-	clude form n	numbers and ti	itles, i	f any,		
and file arrangement)	•				- 5400-			
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Doguments welstin-	+- D-11 3 .							
Documents relating	to Daily Act	ivities of the	ne Fuel Oil	Mobile Calibr	rating U	nit, lis	ting	
<pre>oil companies, serv these calibrations.</pre>	tee Stations	s, and/or dea	lers oil pum	ips calibrated	i and th	e result	s of ,	
these calibrations.	•					. 2	- '	
Included are: SEE	ATTACHED LIS	5T .						
	THE TOTAL DESCRIPTION OF THE PERSON OF THE P	, <u></u>					.:	
							- 1 14 -	
Files are ar <u>ra</u> nged	by Month, th	nereunder by	he Day.					
		_	-					
	Д 11 11 Д	CH SAMPLES OF	कारन सभए					
2. Equipment not leady	No of Fravers	Cu Pt. of Perords			No. of Draw	cers Cu. Pt	— <u> </u>	
letter-size Fire Drawers	· · · · · · · · · · · · · · · · · · ·		ABRUAL BATE (DF ACCUMULATION				
					1/2		1	
Legal-mize File Drawers			Figor Space Geom-	pież (Square Feet)	In Office	a; in Sto	orage Area s)	
	11	2	.,					
						as' Preced		

QUESTIONNAIRE Place an "s" in the proper column. If answer is "YES," please explain	₹ES	NO
13. Is this the Record Copy of the series?	[x]	[]
14. Is there a duplication of this series in another office or agency?	. []	[x]
15. Is the information contained in this series ever summarized or published? Attach copy of summary or publication.		[x]
16. Does the series contain classified information requiring security handling?		[x]
17. Does the series initiate, amend or terminate agency policies and procedures?		t -
	[x]	[]
19. Is the series (or major portion of it) regularly microfilmed? If yes, why?	[]	[x]
20. Does the record series provide data as input to an EDP file?	[]	[x]
21. Does the record series contain documentation produced as EDP printout?	[]	[x;
22. Has the Federal Government issued instructions governing the retention/disposition of these files?	[]	[x]
23. Will there be a need for these records 10, 15 years from now? If yes, what?	[]	[x]
(Cite Law, Statute, or other reason for the retention requirement) 25. AGENCY RECOMMENDATIONS. This agency recommends that the file series be cut off of each -MCALENDAR YEAR -[]FISCAL YEAR -[]OTHER [x] Hold in the current files area month(s)/ 2 year(s): [] Transfer to [] State Records Center [] Local Holding Area; hold year [] Transfer to State Archives for permanent retention. [] Destroy immediately after cut-off. [] Other: (Specify) (Indicate briefly rationale for recommendations above/or write additional rem	at the,th	end
Records Management Officer (Signature) Date OTHER REQUIRED SIGNATURES	ם	ATE
26. Recommendations Agency Head/Designee in paragraph 25 [] Approved [] Disapproved [] Ulis D. Select	11-:	30-72
are: State Auditor/Designee [] Approved [] Disapproved William M	12-)e-72
STATE RECORDS Secretary of State/Designee Committee [1] Approved [] Disapproved Curroll Jank	12-1	
Attorney General/Designee	12	

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